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Bib Data Sheet

CONFIRMATION NO. 1816

<b>SERIAL NUMBER</b> 09/540,524	<b>FILING DATE</b> 03/31/2000 <b>RULE</b>	<b>CLASS</b> 324	<b>GROUP ART UNIT</b> <del>2862</del> 2859	<b>ATTORNEY DOCKET NO.</b> 000687.00138
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**APPLICANTS**

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\*\* CONTINUING DATA \*\*\*\*\*

New TAFE

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

New TAFE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\*

\*\* 06/07/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 7	TOTAL CLAIMS 54	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: TAF				

**ADDRESS**

27557

**TITLE**

Magnetic resonance imaging with resolution and contrast enhancement

<b>FILING FEE RECEIVED</b> 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit